

Idaho Millenium Fund
Grant Application
“Tobacco-Free Workplace Project”
Elmore Medical Center

I. Executive Summary

October 9, 2008

Organization:

Elmore Medical Center

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Mountain Home, ID 83647

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The purpose of this funding request is to ask for assistance with Elmore Medical Center’s transition to a tobacco-free workplace on September 9, 2009. Funds will be applied toward patient, staff and community education.

Elmore Medical Center (EMC) is comprised of our 24-bed critical access hospital, Trinity Mountain Medical Clinic, Elmore Medical Long Term Care Unit and EMC Specialty Clinic. We are the primary healthcare facility in Elmore County, Idaho. The county is rural and designated by the Health Resources and Services Administration as a Health Professional Shortage Area (HPSA). EMC’s service area encompasses the entire county, caring for 28,114 lives. In addition, we provide care for a number of transient patients from highway accidents because EMC has the only emergency department located in the county

Since we are transitioning to a tobacco-free campus, our target population is anyone in our service area that uses some form of tobacco, including smoking cigarettes and smokeless tobacco. An employee poll conducted in March 2008 found approximately 26% (62) of EMC employees use tobacco. Statistics from the 2005-2007 Idaho Behavioral Risk Factor Surveillance System indicate that roughly 16.7% of Elmore County adults smoke cigarettes and an additional 5.7% use smokeless tobacco. When applied to our service population, an estimated 6,298 persons using tobacco will no longer be able to practice their habit while on EMC’s campus.

The total budget for this project is \$26,345. We are requesting \$16,745 from the Millennium Fund for education materials and equipment.

II. Proposal

A. Organizational Background

Elmore Medical Center (EMC) has been providing healthcare to Elmore County since 1955. Our mission is to provide quality healthcare services that enhance the quality of life for the communities we serve. We accomplish this through daily practice of our six facility values: customer service, respect, communication, teamwork, quality and trust. Our vision is that through excellence in care and service, EMC, in partnership with local and affiliated physicians and other healthcare providers, is the healthcare resource of choice for those we serve.

EMC is a critical access hospital providing 24-hour emergency services, inpatient and outpatient care, and long-term care. EMC is Medicare and Medicaid approved. Our medical staff includes eight family practice physicians, two internists, an OB/GYN and a pediatrician. Other services include radiology, surgery, Center for Community Health, cardiology, laboratory, respiratory therapy and community education.

In addition to patient services, EMC is in the second year of its Certified Nurse Assistants (CNA) apprenticeship program. The program consists of three levels, CNA I, CNA Advanced (level II) and CNA Mentorship (level III). The initial twelve participating students, all CNAs employed by EMC, were selected to participate in this pilot educational program developed in partnership with the Bureau of Apprenticeship and Training, Boise State University, College of Southern Idaho and Idaho Division of Professional and Technical Education. The program was started with IHA Hospital Allocated Funds granted by the Idaho Alliance of Nursing Leaders. All twelve students graduated at the end of the first year.

Our Board of Trustees is comprised of seven elected, unpaid individuals who govern and provide strategic oversight in EMC activities. Members are:

John Bideganeta (Chairman)
Ann Wilson

Jerry LeFever
Jack Walborn

Bill Ringert
Mari Young

Robert Bennet

Hospital administration is organized under the direction of the Hospital Administrator through six senior management positions:

Hospital Administrator: Greg Maurer

- coordinates the operations of various branches of the hospital, plans for future programs and facilities and works with the governing board, government officials and the general public to serve the needs of the hospital and its community

Chief Nursing Officer: Deborah Mills

- coordinates, plans and directs the provision of nursing and clinical services and assures continuity, consistency and timeliness of patient care across the continuum of care at EMC

Chief Financial Officer: Tricia Senger

- responsible for the organization's financial plans and policies along with the administration of accounting practices

Development Director: Doreen Krabbenhoft

-responsible for the ongoing community relations development of EMC and EMC Foundation, including public relations, media coordination, marketing, fundraising and event planning

Chief Operations Officer: Betty Van Gheluwe

-responsible for the oversight of all operational aspects of support and ancillary departments ensuring efficient services that are designed to meet the needs of patients, physicians, the public and staff; coordinates the strategic planning process and evaluates opportunities for new and expanded services

Performance Improvement/Risk Management: Mona Bauer

-responsible for planning, organizing, directing, and evaluating performance improvement and risk management activities and promotes improvement of the delivery of service to all customers, internal and external

EMC is a tax-district hospital and current sources of funding include healthcare service revenue and taxes.

BUDGET SUMMARY FY 2008

		% of Patient Revenues
Patient Revenues	28,827,294	
Revenue Deductions	11,420,512	39.6%
Net Patient Revenues	17,406,782	
Other Operating Revenue	198,650	
Net Revenues	17,605,432	
EXPENSES	18,101,991	62.8%
Net Gain/(Loss) on Operations	\$ (496,559)	-1.7%
Net Non-Operating Revenues	1,184,583	
Net Income/(Loss)	\$ 688,024	
Minor Equipment	\$ 145,083	
Capital Equipment	\$ 1,281,923	

B. Purpose of Request: Goals and Outcomes

EMC is committed to taking a leadership role around the health status of the community. Establishing a tobacco-free campus is one of many steps our hospital is taking to promote and improve the health and wellness of the communities we serve.

Numerous issues surround the tobacco-free transition. Staff currently using tobacco will be prohibited from doing so while on facility grounds, affecting many of their established work routines and attitudes toward their working environment. Patients, including our long-term care residents, will no longer be able to use tobacco, whether at our facility for a routine visit, procedure or extended stay. Community members and vendors must also be trained that even though they are not under our care, a tobacco-free policy includes visitors and contracted personnel working on our grounds.

Information received from staff meetings and surveys have shown EMC that this transition is not a popular decision among tobacco-users; however, we remain committed to establishing a tobacco-free campus on September 9, 2009. Because of the already rising feelings of animosity, it is EMC's desire to provide enough education and cessation assistance to make this change as staff, patient, and community-friendly as possible.

Short-term objectives focus on determining the tobacco education and cessation needs of our service population and implementing a plan to meet those needs. One of our goals is to increase community awareness of the dangers of tobacco use and promote the benefits of cessation through education materials and equipment.

Education materials include printed resources, such as slideguides, pamphlets and booklets. Information will include topics such as stress management, financial cost of using tobacco, weight management after cessation, reasons to quit using tobacco and cessation methods. Materials will be strategically placed around the campus in relation to the length of time and frequency an individual will be in our care (i.e. short informational pamphlets/slide guides in the emergency department and longer, more in-depth cessation materials for inpatients and long-term care residents). Staff will be trained to answer questions that community members and patients have regarding policy and printed information. In addition, printed materials will be distributed at community venues such as local health fairs, businesses/organizations, Air Force Appreciation Day and fundraising events.

The following equipment will be used at community events such as local health fairs, Air Force Appreciation Day and Craze Days, as well as staff in-services and presentations at the request of local businesses:

Masimo RAD-57c CO-Oximeter

The Masimo Rad-57 is a fast, accurate and noninvasive way to detect elevated levels of Carbon Monoxide (CO) in the blood, without having to draw blood and wait for costly lab results. When the Masimo Rad-57's sensor is placed on a person's finger, the device will detect the percentage of CO in the bloodstream in just seconds. Patients will be able to see the difference before and after tobacco use with the first application.

EasyOne Frontline Spirometer System: \$1450

A Spirometer is a device which measures the amount of air a patient can blow out. They breathe in fully and then seal their lips around the mouthpiece of the spirometer. Patients then blow out as fast and as far as they can until their lungs are completely empty. This action measures the patient's forced vital capacity (FVC) – the total amount of air that they blow out in one breath. In patients that use tobacco, their FVC will typically be lower than in those that do not.

Spirette Breathing Tube Mouthpiece: \$700

Disposable mouthpieces will be used for demonstrations at community events, such as local health fairs, Air Force Appreciation Day and Craze Days. The EMC health fair alone has approximately 300 visitors, so extra mouthpieces are needed; \$700 is for two cases containing 200 mouthpieces each.

These handheld devices are lightweight and easily portable. They will provide real-time health data to individuals who are using tobacco that may question the proposed effects on their health or the health of a loved one. Since many individuals have difficulty “believing without seeing”, we feel these tools will make a huge impact on people’s perception of how harmful tobacco really is and that through education they will be motivated to quit using tobacco themselves and encourage loved ones to quit.

Another short-term objective is to establish and promote routine cessation classes in cooperation with Central District Health Department (CDHD). The county currently has only two cessation programs. The first is offered at Mountain Home Air Force Base and is only available to enlisted airmen, their families, and retirees. The second, through CDHD, has primarily focused on youth classes mandated by tobacco citations. It is our goal that our classes will be open to both EMC staff and community members.

A long-term objective we intend to accomplish is improvement in the overall health of our community. Through education and cessation promotion, we will inform our service population of the dangers of tobacco and encourage current users to quit and provide non-users with information they can provide to friends and family that use tobacco. In addition, we hope to prevent the start of tobacco-use among those never having used before.

Another long-term objective of our project is to motivate other community businesses/ organizations to implement their own tobacco-free policies. While EMC is designated as the primary healthcare facility in our service area, we understand that only through combined efforts will our community win the fight against tobacco.

C. Organizational Capacity

“Establishing a tobacco free environment” is listed as a tactic under the EMC strategic initiative “Heighten Community Awareness.” Our mission is to provide quality healthcare services that enhance the quality of life for the communities we serve and we cannot accomplish this as long as our organization allows a proven-harmful substance, tobacco, to be used on our campus. Tobacco use not only affects first-hand users, but also our patients, residents, staff and visitors that are subjected to its second-hand effects.

Our hospital has been successful in the past implementation of new policies and staff and community programs. As previously mentioned, EMC is in the second year of its Certified Nurse Assistants (CNA) apprenticeship program with its second group of participants scheduled to graduate in the summer of 2009. In addition, our education department has recently implemented early pregnancy and breast-feeding classes, a preceptor program through Rural Connections and has more than doubled its number of EMC volunteers.

The Mountain Home office of Central District Health (CDHD) is located on the same block as EMC and their campus converted to tobacco-free on July 1, 2008. In addition to physical premises, we plan to work in

cooperation with CDHD to establish a more routine cessation class schedule based on the assumption that when we implement our tobacco-free policy, the need for stable classes will greatly increase.

It is our plan that cessation classes will be taught by Anne Lane, who is contracted through CDHD. Anne has a Master's in counseling and has been teaching cessation classes to youth and adults for the past 7 years. EMC department managers will be responsible for educating staff on policy. EMC's Director of Education will provide education to staff regarding patient needs and scripting towards staff and visitors seen using tobacco on our premises. EMC's respiratory therapist will be responsible for providing staff training on education equipment and using the equipment at community venues. Community education will be continued through existing education department classes, health fairs, and Center for Community Health. EMC's Development Director will be responsible for community relations and marketing.

Our target population is anyone in our service area, regardless of demographics, that uses some form of tobacco. Because our entire campus is going tobacco-free and not only employees, our target population is involved in every aspect of our organization as staff, volunteers, board members, physicians, patients, visitors and vendors.

D. Process

EMC has established a Tobacco Free Taskforce to plan and implement the transition to a tobacco-free campus. Members include EMC's Health Safety Nurse, Director of Education, Development Director, Central Services Manager, Pharmacy Manager, Center for Community Health Planner and multiple staff representing other hospital departments. Members represent populations of individuals who use tobacco and those that do not. The target transition date is September 9, 2009. The Taskforce has identified five categories for planning and implementation: policy development, cessation assistance, public relations and communication, operations and tobacco-free education. The operations of each category are lead by a department manager with Taskforce members providing support; daily activities are based on what needs to be completed during the specified timeframe.

The Tobacco-Free Taskforce has established the following timeline to accomplish our goals:

September - December 2008: Review sample tobacco-free policies established by other healthcare facilities and draft EMC policies; research available cessation assistance and patient education programs implemented by other facilities and develop a communications plan to inform all stakeholders of EMC's transition to a tobacco-free campus as of September 9, 2009.

January-March 2009: Present tobacco-free policy drafts to appropriate committees and staff for review, input and revisions; cessation education program development with CDHD; draft selected communication tools, establish patient education protocols and determine staff education needs

April-July 2009: Finalize and approve tobacco-free policies and provide education and training for staff and public regarding new policies; begin cessation education programming; implement community wide public relations efforts

July-August 2009: Purchase patient education materials and provide staff training on appropriate use and explanation of materials

September 2009: Distribute education materials and implement tobacco-free transition on September 9, 2009

October 2009: Begin providing tobacco-free education at local health fairs and businesses

Existing community resources that will be used include: EMC or the public library for cessation classes, EMC personnel for staff/patient education and community relations material, and cessation instructor(s) from CDHD.

The target population will benefit from Taskforce activities by having increased availability of tobacco education and cessation information, including printed materials and cessation classes. For those choosing to quit using tobacco, they have a greater chance at improved health and wellness than those who do not.

Employee surveys have been distributed to determine the number of tobacco-using staff affected by this transition. Surveys will also be conducted to determine which cessation opportunities staff is most interested in. They have been invited to attend Taskforce meetings and/or share their input regarding the transition to Taskforce members. An employee information session will also be conducted by senior management to allow staff members to voice their questions and concerns.

Evaluation Plan

Throughout this transition, EMC hopes to answer the following questions:

- (1) Did EMC staff feel our education and cessation assistance was helpful with the tobacco-free transition and if not, what could be changed?
- (2) Did our community education and transition motivate any community members to pursue cessation?
- (3) Did our transition motivate any community businesses or organizations to institute their own tobacco-free policies?

To assess EMC staff response, we will use surveys, employee information sessions and attendance sheets from tobacco education and cessation assistance opportunities. Since it is not possible to determine exact community individuals that use tobacco, community findings will be limited to cessation class attendance sheets and surveys provided to participants. A post-stay survey will also be implemented to determine if tobacco education and cessation information is helpful to patients while they are in our care. EMC will track the number of requests for policy information and presentations to their administration to assess whether our transition motivated other organizations to institute their own tobacco-free policies.

Data will be used to evaluate the effectiveness of our internal and external efforts. If staff is unsatisfied with the cessation education and assistance being provided, the Taskforce will review their comments and make changes accordingly. External outcomes will be improved by providing our findings to businesses and organizations wanting to implement their own tobacco-free policy through presentations to their administration and by providing them with any updates to EMC policy.

Sustainability

EMC has the major responsibility of ensuring the sustainability of this project. The education department will continue to provide staff education through new employee orientation and mandatory staff training. Based on evaluated effectiveness, EMC will continue to provide education and cessation materials to patients and visitors. Materials will be budgeted for and ordered accordingly. EMC will also continue community education through its Center for Community Health and local health fairs. EMC will provide insight and training opportunities to community organizations wanting to educate their members/employees on the dangers

of tobacco use and/or the process of transitioning to a tobacco-free environment. Tobacco cessation classes will continue to be offered in cooperation with CDHD.

III. Budget

Project Budget

	Millennium Fund	EMC		TOTAL
Personnel Costs				
Salaries: Education & Respiratory Staff	0	5,000		5,000
Benefits	0	0		0
Total Personnel Costs	0	5,000		5,000
Operating Expenditures				
1. Education Materials	9,600	1,400		11,000
2. Communications Cost	0	3,200		3,200
3. Meeting Room	0	0		0
4. Office Supplies	0	0		0
Total Operating Expenditures	9,600	4,600		14,200
Capital Outlay				
1. Masimo RAD-57c CO-Oximeter	4,995	0		4,995
2. EasyOne Frontline Spirometer System	1,450	0		1,450
3. Spirette Breathing Tube Mouthpiece	700	0		700
Total Capital Outlay	7,145	0		7,145
Trustee Benefit Payments				
Total T/B Payments				0
TOTAL BUDGET	16,745	9,600		26,345
% TOTAL	63.6%	36.4%		100.0%

Personnel Costs Detail Budget

Position Title	Staff Time	Millennium Fund	EMC		Total
1. Director of Education	0.25		2,500		2,500
2. Respiratory Therapist	0.25		2,500		2,500
TOTAL	0.50	0	5,000	0	5,000

Current Request

Our total project budget is \$26,345 and we are requesting \$16,745 from the Millennium Fund.

Personnel Costs: \$5000 (Millennium Fund \$0; EMC \$5,000)

Tobacco-Free Taskforce members are volunteers and work under the confines of already-established personnel duties and costs. Department managers will also provide policy education under the same circumstances. Educational staff will be needed for approximately 10 hours a week to train staff on patient education materials and equipment. Respiratory staff will need approximately one hour a week to train staff on education equipment, one hour a week to use equipment at business/organization presentations and the remainder of their time will be used in community education opportunities such as local health fairs, Air Force Appreciation Day and Craze Days.

Operating Expenditures: \$14,200 (Millennium Fund \$9,600; EMC \$4,600)***Education Materials: \$11,000 (Millennium Fund \$9,600; EMC \$1,400)***

Education materials include printed resources, such as slideguides, pamphlets and booklets. Information will be presented on topics such as stress management, financial cost of using tobacco, weight management after cessation, reasons to quit using tobacco and cessation methods. Materials will be strategically placed around the campus in relation to the length of time and frequency an individual will be in our care (i.e. short informational pamphlets/slide guides in the emergency department and longer, more in-depth cessation materials for inpatients and long-term care residents). Staff will be trained to answer questions that community members and patients have regarding policy and printed information. In addition, printed materials will be distributed at community venues such as local health fairs, businesses/organizations, Air Force Appreciation Day and fundraising events.

Communications Cost: \$3,200 (Millennium Fund \$0, EMC \$3,200)

Communications cost includes “tobacco-free zone” signage and community relations. Internal and external signage will be used to clearly identify our campus as a “tobacco-free zone”. Community relations include employee and Health Matters newsletter articles and press releases.

Meeting Room/Office Supplies: \$0

Meeting rooms for staff education and cessation opportunities will be in-kind donations from EMC. Office supplies will also be in-kind contributions.

Capital Outlay: \$7,145 (Millennium Fund \$7,145, EMC \$0)

Capital outlay includes equipment needed for staff, patient and community education regarding the effects of tobacco use on an individual’s respiratory status. We will use this equipment at community events, such as local health fairs, Air Force Appreciation Day and Craze Days, as well as staff in-services and presentations at the request of local businesses.

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This is EMC's first application to the Millennium Fund; past funding does not apply.